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## FORM D

#### UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

### FORM D



Prefix

## NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, **SECTION 4(6), AND/OR**

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When To File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et service 77d(6).  When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date of which it is due, on the date it was mailed by United States registered or certified mail to that address.  Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.  Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.  Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any change thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix nee not be filed with the SEC.  Filing Fee: There is no federal filing fee.  State:  This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sale are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount sha accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.  ATTENTION  Failure to file notice in the appropriate states will not result in a loss of t	
	PTION
	RECEIVED
Filing Under (Check box(es) that apply): Rule 504 Rule 505 X Rule 506 Section 4(6)	
A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about the issuer	190
Name of Issuer ( check if this is an amendment and name has changed, and indicate change.)	
Waters Fund II, LLC	
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
Address of Principal Business Operations (Number and Street, City, State, Zip Code)	
Brief Description of Business	
Real Estate Investment	
☐ corporation ☐ limited partnership, already formed ☐ other (1	please specify): limited liability company
Actual or Estimated Date of Incorporation or Organization: 0 3 0 5 X Actual Estimated Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State	c:
GENERAL INSTRUCTIONS	
Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D	I MOMSON or Section 4(6), 17 CFR 230.501 ct sen Fig. ANOHAL
and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given be	
Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20	9549.
	ly signed. Any copies not manually signed must be
thereto, the information requested in Part C, and any material changes from the information previously supp	
Filing Fee: There is no federal filing fee.	
This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for accompany this form. This notice shall be filed in the appropriate states in accordance with state law this notice and must be completed.	Securities Administrator in each state where sales or the exemption, a fee in the proper amount shall. The Appendix to the notice constitutes a part of

SEC 1972 (5-05)

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

1 of 9



#### A. BASIC IDENTIFICATION DATA Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer. Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Check Box(es) that Apply: Director General and/or X Promoter ☐ Beneficial Owner Executive Officer Managing Partner Full Name (Last name first, if individual) Waters Fund Management, LLC Business or Residence Address (Number and Street, City, State, Zip Code) 101 Cooper Street, Santa Cruz, CA 95060 Check Box(cs) that Apply: Beneficial Owner Director Promoter Executive Officer General and/or Managing Partner Full Name (Last name first, if individual) Tose, Robert Business or Residence Address (Number and Street, City, State, Zip Code) 144 Walnut Avenue, Suite B, Santa Cruz, CA 95062 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Li, Michael and Li, Alice Business or Residence Address (Number and Street, City, State, Zip Code) 1128 Elmsford Drive, Cupertino, CFA 95014 Promoter Check Box(es) that Apply: X Beneficial Owner Executive Officer General and/or ☐ Director Managing Partner Full Name (Last name first, if individual) Berg, Clyde Business or Residence Address (Number and Street, City, State, Zip Code) 10050 Bandley Drive, Cupertino, CA 95014 Check Box(es) that Apply: Beneficial Owner Executive Officer General and/or Managing Partner Full Name (Last name first, if individual) Zhuang, Jennifer Business or Residence Address (Number and Street, City, State, Zip Code) 19698 Glen Brae Drive, Saratoga, CA 95070 Beneficial Owner Executive Officer General and/or Promoter Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter ☐ Beneficial Owner ☐ Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code)

	e de esta esta esta esta esta esta esta est	4. 74 Novice W. S.	jandjan dijalij		B. IN	FORMATI	ON ABOU	T OFFERI	٧G		Salton Comment		1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1
1.	Has the	issuer sold	, or does th	e issuer in	tend to sel	l to non-ac	credited is	nvestors in	this offeri	no?		Yes	No ⊠
•	1140 1110					Appendix,				_			P
2.	What is	the minim	um investm			•		_				<u>\$</u> 250,	00.00
												Yes	No
3.			ermit joint									X	
4.	commis If a pers or states	sion or simi on to be list s, list the na	ion requested ar remuner ted is an ass me of the branch you may se	ration for s ociated per roker or de	olicitation rson or age aler. If mo	of purchase nt of a brok re than five	ers in conne er or deale e (5) persor	ection with r registered as to be list	sales of sec I with the S ed are asso	urities in tl EC and/or	he offering. with a state		
Ful	l Name (	Last name:	first, if indi	vidual)									
Bu	siness or	Residence	Address (N	umber and	Street, Ci	ty, State, Z	ip Code)						
Na	me of As	sociated Br	oker or Dea	ıler									
Sta	ites in Wi	nich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers						
	(Check	"All States	" or check	individual	States)		***************************************		•••••				l States
	AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ID
	IL	IN	ĪA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
	MT	NE	NV	NH	NJ	NM	NY	NC	ND	OH	OK	OR	PA
	RI	SC	SD	TN	TX	UT	VT	VA	WA	WV	WI	WY	PR
Fu	ll Name (	Last name	first, if indi	vidual)									
Bu	siness or	Residence	Address (N	Number an	d Street, C	lity, State, 2	Zip Code)						
Na	me of As	sociated Br	oker or Dea	aler					······································				
Sta	ates in Wi	nich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers						
	(Check	"All States	or check	individual	States)	***************************************		••••••	•••••			☐ Al	1 States
	AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ID
	IL	IN	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
	MT RI	NE SC	NV SD	NH TN	NJ TX	NM UT	NY VT	NC VA	ND WA	OH WV	OK]	OR WY	PA PR
Fu			first, if indi										
		D '1	A 11 (2)	. T. 1	10		<u></u>						
В	isiness of	r Residence	Address (1	Number an	id Street, C	ity, State,	Zip Code)						
Na	ime of As	sociated B	oker or De	aler									
St	ates in W	hich Persor	Listed Ha	Solicited	or Intends	to Solicit	Purchasers	S					
	(Check	"All State	s" or check	individua	l States)			****************				☐ Al	II States
	AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ID
	IL	IN NE	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS OR	MO
	MT RI	NE SC	NV SD	NH TN	NJ TX	NM UT	NY VT	NC VA	ND WA	OH WV	OK WI	WY	PA PR

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

# C. OFFERING PRICE; NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.			
		Aggregate ffering Price	An	nount Already Sold
	Debt\$\$	-0-	\$	-0-
	Equity	35,000,000.00	\$ <u>_</u> 1	,700,000.00
	☐ Common ☐ Preferred			
	Convertible Securities (including warrants)\$	-0-	\$	-0-
	Partnership Interests	0-	\$	-0-
	Other (Specify)\$	-0-	\$	-0-
	Total		§ 1	,700,000.00
	Answer also in Appendix, Column 3, if filing under ULOE.			
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."  Accredited Investors	Number Investors 9		Aggregate ollar Amount of Purchases 1,700,000.00
	Non-accredited Investors	-0-	\$	-0-
	Total (for filings under Rule 504 only)	-0-	\$	-0-
	Answer also in Appendix, Column 4, if filing under ULOE.		_	
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.			
	Time of Official	Type of	Ι	Dollar Amount Sold
	••	Security		
	Rule 505		\$_	
	Regulation A			
	Rule 504		φ_	
	Total		\$_	
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.			
	Transfer Agent's Fees		<b>S_</b>	₩ <b></b> *
	Printing and Engraving Costs	x	] \$_	5,500.00
	Legal Fees	x	] \$_	25,000.00
	Accounting Fees	x	] \$_	5,000.00
	Engineering Fees		] \$_	
	Sales Commissions (specify finders' fees separately)	F	- ]	
	Other Expenses (identify) Seminars (\$7,500.00) and miscellaneous expenses (\$1,200		\$_	8,700.00
	Total			44,200.00

	b. Enter the difference between the aggregate offering and total expenses furnished in response to Part C — Qu proceeds to the issuer."	estion 4.a.	This c	lifference is th	e "adjusted gross	;	<sub>\$_</sub> 34,955,8	300.00
5.	Indicate below the amount of the adjusted gross proceed of the purposes shown. If the amount for any check the box to the left of the estimate. The total of the proceeds to the issuer set forth in response to Part C	purpose is ne payment	not kn s listec	own, furnish I must equal t	an estimate and	l		
						Payments Officers Directors, Affiliates	, & Paymer	
	Salaries and fees					<b>\$</b>	\$	
	Purchase of real estate (including development exp	enses and	d cont	ngencies)			X  \$ 33,205	5,800.00
	Purchase, rental or leasing and installation of machi and equipment	nery						
	Construction or leasing of plant buildings and facili					_	_	
	Acquisition of other businesses (including the value offering that may be used in exchange for the assets issuer pursuant to a merger)	of securit	ies inv	olved in this		_	_	
	Repayment of indebtedness					_	_	
	Working capital							
	Other (specify): Manager's Draw (draw against	Manager'	s prof	it)		□ \$ 1,750,00	□ ³	
	(0,000)	· · ·				₾ ~		
						\$	\$	
	Column Totals	•••••				X \$ 1,750,0	00.00 X \$ 33,20	5,800.00
	Total Payments Listed (column totals added)					x	\$ <u>34,955,800.00</u>	
12		D. FEDE	RAL	SIGNATURI	Z III			
sig	e issuer has duly caused this notice to be signed by the unature constitutes an undertaking by the issuer to furninformation furnished by the issuer to any non-accre	ndersigned sh to the U	duly a	authorized per curities and E	rson. If this notic	ce is filed unde ission, upon w		
lss	uer (Print or Type)	Signature	77,	/	1	Date	`	
V	aters Fund II, LLC		1	V 5			0-7-05	>
Na	me of Signer (Print or Type)	Title of 81g	gner (I	rint or Type	)			
(	thad Waters	Manag	ar of	Maters F	und Manage	ment IIC	Manager	

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS.

---- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

الأخصاء منه يأسر في در		E. STATE SIGNATURE	W	ja di Tangan
1.			Yes	No 🔀
	See Appendix, Column 5, for state response.  The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed a notice D (17 CFR 239.500) at such times as required by state law.  The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnish issuer to offerees.  The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the a of this exemption has the burden of establishing that these conditions have been satisfied.  The transfer of the state in which this notice is filed and understands that the issuer claiming the another of this exemption has the burden of establishing that these conditions have been satisfied.  The transfer of the state in which this notice is filed and understands that the issuer claiming the another of the state in which this notice is filed and understands that the issuer claiming the another of the state in which this notice is filed and understands that the issuer claiming the another of the state in which this notice is filed and understands that the issuer claiming the another of the state in which this notice is filed and understands that the issuer claiming the another of the state in which this notice is filed and understands that the issuer claiming the another of the state in which this notice is filed and understands that the issuer claiming the another of the state in which this notice is filed and understands that the issuer claiming the another of the state in which this notice is filed and understands that the issuer claiming the another of the state in which this notice is filed and understands that the issuer claiming the another of the state in which this notice is filed and understands that the issuer is familiar with the conditions that must be satisfied to be entitled to			
2.			iled a not	tice on Form
3.		furnish to the state administrators, upon written request, informat	ion furn	ished by the
4.	limited Offering Exemption (ULOE) of the sta	te in which this notice is filed and understands that the issuer clai		
	suer has read this notification and knows the conter uthorized person.	nts to be true and has duly caused this notice to be signed on its beha	If by the	undersigned
ssuer (	(Print or Type)	Signature Date		
Wate	ters Fund II, LLC	(2-7-05	5	
Name (	(Print or Type)	Title (Paint or Type)		
Chac	d Waters	Manager of Waters Fund Management, LLC	C, Mar	nager

#### Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

				AP	PENDIX			601	
1	Intend to non-a investor	to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		amount pui	investor and rchased in State C-Item 2)		under Sta (if yes, explana	ification ate ULOE attach ation of granted)
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
AL									
AK									
AZ									
AR									
CA		XX	LLC Interests/ \$34,900,000.00	8	1,600,000.00				XX
СО		XX	LLC Interests/ \$100,000.00	1	100,000.00				XX
СТ									
DE				ļ					
DC								ļ	
FL									
GA									
HI									
ID		<del> </del>							
IL		ļ							
IN									
IA					-				
KS				<u> </u>					
KY				-					
LA				-					
ME									
MD									<del> </del>
MA								ļ	
MI				<u> </u>					
MN	-								
MS	<u> </u>								

## APPENDIX

1	Intend to non-a investor	to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		amount pu	investor and rchased in State C-Item 2)		under Sta (if yes, explana	ntion of granted)
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
МО									
MT							<u> </u>		
NE	-								
NV									
NH									
NJ									
NM									
NY									
NC									
ND									
ОН									
ОК								_	
OR								-	
PA									·
RI								_	
SC			-		_				
SD								ļ	
TN									
TX									
UT								ļ	
VT									
VA									
WA								<u> </u>	
WV								<u> </u>	
WI							<u> </u>		

1	Type of security and aggregate offering price offered in state (Part B-Item 1)  Type of security and aggregate offering price offered in state (Part C-Item 1)  Number of Accredited Non-Accredited						waiver	ate ULO attach ation of granted	
	(Part B	-Item 1)	(Part C-Item 1)	i	(Part	Number of		(Part E	-Item 1)
State	Yes	No		Investors	Amount	Investors	Amount	Yes	No
WY									
DD									